						-	<u>/</u>				
						Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO						RD	,	<u> </u>	1	_	
Effective December 29, 1999							(9	664	587	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE O			OTHER THAN SMALL ENTITY	
FC	OR .	NUMB	ER FILED	NUMBER	EXTRA	RAT	E FE	E	RATE	FEE	
BA	SIC FEE						345	5.00 OF		690.00	
TC	TAL CLAIMS	/(: minus	20= *	-	X\$ 9)=	OF	X\$18=		
INE	EPENDENT CL	AIMS 3	minus	3 = *		X39	=	OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT)=	OF			
* If the difference in column 1 is less than zero, enter "0" in column 2							AL 30	/ < OR			
CLAIMS AS AMENDED - PART II							`` [OTHER	TUAN	
(Column 1)				(Column 2)	(Column 3)	SMA	LL ENTI	TY OR			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ADI E TIO	¶AL	RATE	ADDI- TIOMAL VEE	
	Total	. 16	Minus	<i>9</i> 0	= /	X\$ 9	1/	OR	X\$18=	/==	
ME	Independent	· 5	Minus	*** 3	=	X39	/	OR	V70 /		
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT CLAIM			_				
						+130	=	OR	+260=		
						ADDIT. F	EE	OR	/ TOTAL ADDIT. FEE		
		(Column 1)		(Column 2)	(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADI TION FE	IAL	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	=	X\$ 9:	=	OR	X\$18≂		
	Independent	*	Minus	***	=	X39=	=	OR	X78=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+130		OR	+260=		
						. <u> </u>	AL	OR	TOTAL		
		(Column 1)		(Calumn 0)	(Calumn 0)	ADDIT. F	EE L		ADDIT. FEE	<u> </u>	
		(Column 1) CLAIMS	The Prince of the State of the	(Column 2) HIGHEST	(Column 3)		1.00				
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADE TION FE	IAL	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	=	X\$ 9=	<u>.</u> .	OR	X\$18=		
AME	Independent	*	Minus	***	=	X39=		OR	X78=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT CLAIM			_	$ $ on			
* 1	f the entry in colur	+130=		OR	+260=						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1											